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## APPLICANTS

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\*\* CONTINUING DATA ..... *ls* 07.01.04

\*\* FOREIGN APPLICATIONS ..... *ls*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 4	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 2
35 USC 118 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>ls</i>				
Verified and Acknowledged Examiner's Signature <i>ls</i> Initials				

## ADDRESS

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## TITLE

Method and system for creating dental models from imagery

<b>FILING FEE RECEIVED</b> 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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